

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
KeyCorp Advocates Fund

ADDRESS (number and street) 127 Public Square  
OH-01-27-1816  
 Check if different than previously reported. (ACC)  
Cleveland OH 44114

2. **FEC IDENTIFICATION NUMBER** C00073155  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2008 through 01 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Erskine E. Cade

Signature of Treasurer Electronically Filed by Erskine E. Cade Date 02 14 2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
KeyCorp Advocates Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		31295.11
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	31295.11									
(c) Total Receipts (from Line 19) .....	17194.51	17194.51								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	48489.62	48489.62								
7. Total Disbursements (from Line 31) .....	10103.50	10103.50								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	38386.12	38386.12								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
KeyCorp Advocates Fund

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A) .....	17194.51	17194.51
(ii) Unitemized .....	17194.51	17194.51
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	17194.51	17194.51
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	17194.51	17194.51
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	17194.51	17194.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	17194.51	17194.51

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3.50	3.50
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3.50	3.50
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	7600.00	7600.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	10103.50	10103.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10103.50	10103.50

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	17194.51	17194.51
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17194.51	17194.51
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3.50	3.50
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3.50	3.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) Steve Austria for Congress  Mailing Address Cindy Barnett, Treasurer 100 E. Broad Street, Suite 2330  City Columbus State OH Zip Code 43215  Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Steve Austria Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 07	Transaction ID: 6453428 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 7 / 2 0 0 8  Amount of Each Disbursement this Period 1000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Stivers for Congress  Mailing Address 372 W. 2nd Avenue  City Columbus State OH Zip Code 43201  Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Steve Stivers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 15	Transaction ID: 6472071 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8  Amount of Each Disbursement this Period 500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Steve Austria for Congress  Mailing Address Cindy Barnett, Treasurer 100 E. Broad Street, Suite 2330  City Columbus State OH Zip Code 43215  Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Candidate Name Steve Austria Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 07	Transaction ID: 6472070 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 8  Amount of Each Disbursement this Period 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

A.

Full Name (Last, First, Middle Initial)  
Driehaus For Congress

Transaction ID: 6472440

Date of Disbursement

Mailing Address 1018 Benz Avenue

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	8		2	0	0	8

City State Zip Code  
Cincinnati OH 45238

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement

011
Category/ Type

Candidate Name  
Mr. Steven Driehaus

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 01

SUBTOTAL of Disbursements This Page (optional) ..... ►

500.00
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TOTAL This Period (last page this line number only) ..... ►

2500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

**A.** Full Name (Last, First, Middle Initial)  
Batchelder for Representative Committee

Mailing Address H. C. Davis, Treasurer  
22 Parkview Drive

City Medina State OH Zip Code 44256

Purpose of Disbursement  
William Batchelder, STATE HOUSE 69 OH

Candidate Name  
William Batchelder

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 69

Transaction ID: 6451124

Date of Disbursement

/   /

Amount of Each Disbursement this Period

William Batchelder, STATE HOUSE 69 OH

**B.** Full Name (Last, First, Middle Initial)  
Finkbeiner Committee

Mailing Address Mike White, Treasurer  
1817 Madison Avenue

City Toledo State OH Zip Code 43604

Purpose of Disbursement  
Carleton Finkbeiner, MAYOR OH

Candidate Name  
Carleton Finkbeiner

Office Sought:  House  
 Senate  
 President

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 6453498

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Carleton Finkbeiner, MAYOR OH

**C.** Full Name (Last, First, Middle Initial)  
Danny Bubp for State Representative Committee

Mailing Address Wendell Rickey, Treasurer  
18877 St. Rt. 136

City Winchester State OH Zip Code 45697

Purpose of Disbursement  
Danny Bubp, STATE HOUSE 88 OH

Candidate Name  
Danny Bubp

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 88

Transaction ID: 6453483

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Danny Bubp, STATE HOUSE 88 OH

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Friends of Shirley Smith</p> <p>Mailing Address Karen Evans, Treasurer 13901 Woodworth Road</p> <p>City Cleveland State OH Zip Code 44112</p> <p>Purpose of Disbursement Shirley Smith, STATE SENATE 21 OH</p> <p>Candidate Name OH Sen. Shirley Smith</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 6453478 <b>Date of Disbursement</b> 01 / 17 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>Shirley Smith, STATE SENA- TE 21 OH</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Mecklenborg for State Representative</p> <p>Mailing Address James Krause, Treasurer 6648 Pownerfarm Drive</p> <p>City Cincinnati State OH Zip Code 45248</p> <p>Purpose of Disbursement Robert Mecklenborg, STATE HOUSE 30 OH</p> <p>Candidate Name Mr. Robert Mecklenborg</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 30</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 6455255 <b>Date of Disbursement</b> 01 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>Robert Mecklenborg, STATE HOUSE 30 OH</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Citizens with Celeste</p> <p>Mailing Address H. Ritchey Hollenbaugh, Treasurer 366 E. Broad Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Ted Celeste, STATE HOUSE 24 OH</p> <p>Candidate Name OH Rep. Ted Celeste</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 24</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 6466653 <b>Date of Disbursement</b> 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Ted Celeste, STATE HOUSE 24 OH</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1050.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

<p><b>A.</b> Full Name (Last, First, Middle Initial) Republican Party of Cuyahoga County</p> <p>Mailing Address 1500 W. 3rd Street, Suite 120 The MK Ferguson Building</p> <p>City Cleveland State OH Zip Code 44113</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 6466726 <b>Date of Disbursement</b> 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Friends of Nan Baker</p> <p>Mailing Address Mark Getsay, Treasurer 29761 Devonshire Oval</p> <p>City Westlake State OH Zip Code 44145</p> <p>Purpose of Disbursement Nan Baker, STATE HOUSE 16th OH</p> <p>Candidate Name Ms. Nan Baker</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 6466705 <b>Date of Disbursement</b> 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Nan Baker, STATE HOUSE 16- th OH</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee for Cindy Lazarus for Franklin County Commiss- ioner</p> <p>Mailing Address Alex Shumate, Treasurer 41 South High Street</p> <p>City Columbus State OH Zip Code 43215</p> <p>Purpose of Disbursement Cindy Lazarus, LOCAL OH</p> <p>Candidate Name Ms. Cindy Lazarus</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 6466724 <b>Date of Disbursement</b> 01 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Cindy Lazarus, LOCAL OH</p> <p>011 Category/ Type</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

2500.00

**TOTAL** This Period (last page this line number only) ..... ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

A.	Full Name (Last, First, Middle Initial) Driehaus for State Representative	Transaction ID: 6466725 Date of Disbursement 01 / 25 / 2008
	Mailing Address Kim Gilday-Weber, Treasurer 4990 Relleum Avenue	Amount of Each Disbursement this Period 250.00
	City Cincinnati	State OH
	Zip Code 45238	
	Purpose of Disbursement Denise Driehaus, STATE HOUSE 31 OH	011 Category/ Type
	Candidate Name Ms. Denise Driehaus	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District: 31	Denise Driehaus, STATE HO- USE 31 OH

B.	Full Name (Last, First, Middle Initial) Citizens for Amstutz	Transaction ID: 6466729 Date of Disbursement 01 / 25 / 2008
	Mailing Address Dale Long, Treasurer 172 South Sunset Drive	Amount of Each Disbursement this Period 500.00
	City Orrville	State OH
	Zip Code 44667	
	Purpose of Disbursement Ron Amstutz, STATE HOUSE 3rd OH	011 Category/ Type
	Candidate Name Mr. Ron Amstutz	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District: 03	Ron Amstutz, STATE HOUSE 3rd OH

C.	Full Name (Last, First, Middle Initial) Ohio House Democratic Caucus Fund	Transaction ID: 6475428 Date of Disbursement 01 / 30 / 2008
	Mailing Address Otto Beatty Jr., Treasurer 271 E. State Street	Amount of Each Disbursement this Period 500.00
	City Columbus	State OH
	Zip Code 43215	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
KeyCorp Advocates Fund

A.

Full Name (Last, First, Middle Initial)  
Committee to Elect David Goodman

Transaction ID: 6475383  
Date of Disbursement

Mailing Address Ben Kanzeg, Treasurer  
1908 Cedar Willow Drive

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	8

City Columbus State OH Zip Code 43229

Amount of Each Disbursement this Period

Purpose of Disbursement  
David Goodman, STATE SENATE 3rd OH

011
Category/ Type

300.00
--------

Candidate Name  
David Goodman

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

David Goodman, STATE SENATE 3rd OH

State: OH District:

B.

Full Name (Last, First, Middle Initial)  
Ohio Democratic Party

Transaction ID: 6475449  
Date of Disbursement

Mailing Address Chris Redfern, Treasurer  
271 East State Street

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	8

City Columbus State OH Zip Code 43215

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

500.00
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Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ►

800.00
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TOTAL This Period (last page this line number only) ..... ►

7600.00
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